(a) whether additional budgetary allocations have been sought by the Government of Madhya Pradesh for Information Education and Communication (I.E.C.) related activities;

(b) if so, the date on which the said proposal of demand has been received by the Union Government and the action taken on it so far; and

(c) if the amount has not been sanctioned then by when the said proposal will be accepted and the anticipated details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) The Government of India through the National Rural Health Mission (NRHM) allocates flexible budgetary envelopes to States on the basis of a designated formula and National Programme Coordination Committee (NPCC) approves the annual Programme Implementation Plans (PIP) of the States. The Annual PIP, *inter alia*, contains plan of the State for the IEC activities also. As such, the budgetary allocation for IEC is built into the overall annual Flexible Pool allocation. The PIP of Madhya Pradesh has been approved upto financial year 2008-09. The PIP for the financial year 2009-10 is under consideration. The State of Madhya Pradesh has not sought any additional budgetary allocations for IEC related activities over and above the normal allocation.

Criteria for being senior citizen under CGHS

642. SHRI RAJKUMAR DHOOT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that in CGHS dispensaries and hospitals a person is considered senior citizen if he is above 85 years of age;

(b) if so, the reasons therefor as elsewhere a person above 65 years is considered senior citizen;

(c) whether medical officer in-charge has the discretion to decide the age of senior citizen for purpose of treatment; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) No, Sir. No new criteria for senior citizens has been laid down for CGHS beneficiaries.

(b) to (d) Question does not arise in view of reply to (a) above.

Doctor-patient ratio

†643.SHRI PYARELAL KHANDELWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the ratio of doctors *vis-a-vis* patients in the country at present;

(b) whether this ratio is significantly lower than the prevailing global ratio; and

†Original notice of the question was received in Hindi.

(c) if so, the details of the measures being taken by Government to increase the number of doctors?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) The doctor patient ratio varies from case to case depending upon various factors like type of diseases, nature of specialization, type of treatment required *i.e* indoor /outdoor. As per information furnished by Medical Council of India, the total number of registered allopathic doctors in the country is 7, 13, 428 and thus the allopathic doctors population ratio works out to 1: 1584 approximately. In addition there are more than six lakhs practitioners of Indian system of medicine and Homoeopathy. Taking all these number together the doctor population ratio comes to 1:860 approximately. Currently, there are, 289 medical colleges in the country for teaching modern system of medicine with annual intake of 33, 382, who add up to the existing medical manpower. The National Rural Health Mission has been operationalised with the aim of providing accessible and reliable primary health care facilities especially to poor and the vulnerable section of the population.

Treatment of CGHS beneficiaries in super speciality hospitals

644. SHRI VARINDER SINGH BAJWA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the names of private super speciality hospitals in Delhi, Gurgaon, Noida, Ghaziabad and other areas in National Capital Region, where beneficiaries of C.G.H.S. (pensioners) are allowed to receive treatment and health care without prior payment on the authority of their C.G.H.S. cards and for which the hospitals can receive payment from the C.G.H.S. headquarters;

(b) whether there is a proposal under Governments' consideration to add more such hospitals in the area, for the purpose; and

(c) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) A list of private hospitals empanelled under CGHS, Delhi as on 17.02.2009 is given at Statement (*See* below). In non-emergent condition, pensioner CGHS beneficiaries can get credit from private empanelled hospitals only if they are referred to the hospitals by the CGHS. Only in case of emergency can pensioner CGHS beneficiary can go directly to an empanelled hospital.

(b) and (c) Empanelment of private, hospitals under CGHS is now a continuous process. Any hospital interested in being empanelled and which fulfils the terms and conditions for empanelment and agrees to charge the package rates fixed for the city, can apply to Additional Director/Joint Director of the concerned CGHS city. CGHS, after completion of the laid down procedure and if the hospital is found fit for empanelment, will issue appropriate orders.